Inmate Name: BASRALIAN, GARY
Date of Birth: 07/02/1947
Encounter Date: 06/18/2020 12:49

Reg #: 71610-050
Race: WHITE
Provider: Pugliese, Nicole RN
Facility: FTD

Cosigned by Chinwalla, F. DO on 06/22/2020 14:20.

Inmate Name: BASRALIAN, GARY

07/02/1947 Date of Birth:

Encounter Date: 06/17/2020 10:02

Sex:

Race: WHITE Provider: Pugliese, Nicole RN

71610-050 Reg #: Facility: FTD

R02 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

<u>Fahrenheit</u>

Celsius Location

Provider

06/17/2020

09:04 FTD

97.7

36.5 Forehead

Orapello, Brian RN

Pulse:

Date

Time

Rate Per Minute

Location

Rhythm

Provider

06/17/2020 09:04 FTD

Via Machine 60

Regular

Orapello, Brian RN

Respirations:

Date

Time

Rate Per Minute Provider

06/17/2020

09:04 FTD

18 Orapello, Brian RN

Blood Pressure:

Date Time

Value

Location

Position

Cuff Size

Provider

06/17/2020 09:04 FTD

147/80

Left Arm

98 Room Air

Sitting

Adult-regular Orapello, Brian RN

SaO2:

Date

06/17/2020

Time

09:04 FTD

Value(%) Air

Provider

Orapello, Brian RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert & Oriented to Person

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947

Encounter Date: 06/17/2020 10:02

Sex: M Race: WHITE Provider: Pugliese, Nicole RN

Reg #: 71610-050

Facility: FTD Unit: R02

Exam:

Cardiovascular

Observation

Yes: Within Normal Limits

Gastrointestinal

General

Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/No Apparent Distress

This 72 yo male patient is being evaluated this AM for COVID-19.

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Date Initiated Format 06/17/2020 Counseling Handout/Topic
Access to Care

Provider
Pugliese, Nicole

Outcome
Verbalizes
Understanding

06/17/2020 Counseling

Plan of Care

Pugliese, Nicole

Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/17/2020 10:04

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Inmate Name:

BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/17/2020 10:02 Sex: Provider: М

Pugliese, Nicole RN

Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/19/2020 07:16.

Inmate Name:

BASRALIAN, GARY

07/02/1947

Date of Birth: Encounter Date: 06/16/2020 09:38 Sex:

Race: WHITE

Provider: Hernandez, Jessica RN

Reg #:

71610-050

Facility: FTD Unit: R02

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: No Complaint(s)

Evaluation of isolated covid-19 IM Subjective:

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/16/2020

09:39 FTD

36.6

97.9

Hernandez, Jessica RN

Pulse:

Date Time

Rate Per Minute

Location

Rhythm

Provider

06/16/2020 09:39 FTD

60

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/16/2020

09:39 FTD

18 Hernandez, Jessica RN

Blood Pressure:

Date

Time

Value

Location

Position

Cuff Size

<u>Provider</u>

06/16/2020 09:39 FTD

136/82

Hernandez, Jessica RN

SaO2:

Date

Time

Value(%) Air

Provider

06/16/2020

09:39 FTD

98 Room Air

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

No Significant Findings/No Apparent Distress

IM denies any covid-19 like symptoms at this time and remains asymptomatic. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait around isolated

Inmate Name: BASRALIAN, GARY Reg #: 71610-050

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD Encounter Date: 06/16/2020 09:38 Provider: Hernandez, Jessica RN Unit: R02

housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated
06/16/2020FormatHandout/TopicAccess to Care

<u>Provider</u> Hernandez, Jessica Outcome Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/16/2020 09:41

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Inmate Name: BASRALIAN, GARY Date of Birth:

Encounter Date: 06/16/2020 09:38

07/02/1947

Sex: Provider: М

Hernandez, Jessica RN

Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/16/2020 15:15.

BASRALIAN, GARY Inmate Name:

Date of Birth: 07/02/1947

Encounter Date: 06/15/2020 10:02

Sex: Race: WHITE

Provider: Hernandez, Jessica RN

71610-050 Reg #:

Facility: FTD R₀2 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: No Complaint(s)

Evaluation of isolated covid-19 positive IM

Pain: No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/15/2020

10:02 FTD

97.6 36.4 Hernandez, Jessica RN

Pulse:

Date <u>Time</u>

Rate Per Minute Location Rhythm

Provider

06/15/2020 10:02 FTD

60

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/15/2020

10:02 FTD

18 Hernandez, Jessica RN

Blood Pressure:

Date

Time

Value

Location

Position

Cuff Size

Provider

06/15/2020 10:02 FTD

125/71

Hernandez, Jessica RN

SaO2:

Date

<u>Time</u>

Value(%) Air

Provider

06/15/2020 10:02 FTD 100 Room Air

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

No Significant Findings/No Apparent Distress

IM denies any covid-19 like symptoms at this time and remains asymptomatic. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait around isolated

Inmate Name: BASRALIAN, GARY Reg #: 71610-050

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD Encounter Date: 06/15/2020 10:02 Provider: Hernandez, Jessica RN Unit: R02

housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date InitiatedFormatHandout/Topic06/15/2020CounselingAccess to Care

Provider Outcome
Hernandez, Jessica Verbalizes
Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/15/2020 10:04

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Inmate Name: BASRALIAN, GARY
Date of Birth: 07/02/1947
Encounter Date: 06/15/2020 10:02

Reg #: 71610-050
Race: WHITE
Provider: Hernandez, Jessica RN Facility: FTD

Cosigned by Chinwalla, F. DO on 06/15/2020 14:13.

Inmate Name: BASRALIAN, GARY

07/02/1947

Encounter Date: 06/14/2020 10:58

Sex:

Race: WHITE Provider: Pugliese, Nicole RN

71610-050 Reg #: Facility: FTD

Unit: R02

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

Date of Birth:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/14/2020 10:58 FTD

36.1

Pugliese, Nicole RN

Pulse:

Date

Time

Rate Per Minute

97.0

Location

Rhythm

Provider

06/14/2020 10:58 FTD

71

Pugliese, Nicole RN

Respirations:

Date

Time

Rate Per Minute Provider

06/14/2020

10:58 FTD

17 Pugliese, Nicole RN

Blood Pressure:

Date <u>Time</u>

06/14/2020 10:58 FTD

Value 130/76 Location

Position

Cuff Size

Provider

Pugliese, Nicole RN

SaO2:

Date

06/14/2020

Time

10:58 FTD

Value(%) Air

98 Room Air

Provider

Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Case 2:18-cr-00515-MCA Document 34-2 Filed 12/01/20 Page 12 of 49 PageID: 344

Provider: Pugliese, Nicole RN

BASRALIAN, GARY Inmate Name:

Date of Birth: 07/02/1947

Encounter Date: 06/14/2020 10:58

Sex:

Race: WHITE

Reg #: 71610-050

Facility: FTD Unit: R02

Exam:

Cardiovascular

Observation

Yes: Within Normal Limits

Gastrointestinal

General

Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/No Apparent Distress

This 72 yo male patient is being evaluated this AM for COVID-19.

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Date Initiated Format 06/14/2020 Counseling Handout/Topic Access to Care

Provider Pugliese, Nicole Outcome Verbalizes Understanding

06/14/2020

Counseling

Plan of Care

Pugliese, Nicole

Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/14/2020 11:01

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.

Review documentation will be displayed on the following page.

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/14/2020 10:58 Sex: Provider:

M Pugliese, Nicole RN Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/16/2020 08:43.

Inmate Name:

BASRALIAN, GARY

Date of Birth: Encounter Date: 06/14/2020 10:58

07/02/1947

Sex: Provider: M Pugliese, Nicole RN Reg #: Race: Facility: 71610-050 WHITE FTD

Reviewed by Turner-Foster, Nicoletta MD/CD on 06/17/2020 12:00.

Inmate Name:

BASRALIAN, GARY

Date of Birth:

07/02/1947

Encounter Date: 06/13/2020 10:48

Race: WHITE Sex: Provider: Pugliese, Nicole RN

Reg #:

71610-050

Facility: FTD Unit: R02

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

10:43 FTD

Fahrenheit Celsius Location 97.5

36.4 Forehead

Provider

Orapello, Brian RN

Pulse:

Date

06/13/2020

Time

Rate Per Minute

Location

Rhythm

Provider

06/13/2020 10:43 FTD

60 Via Machine Regular

Orapello, Brian RN

Respirations:

Date

Time

Rate Per Minute Provider

06/13/2020

10:43 FTD

18 Orapello, Brian RN

Blood Pressure:

Date

<u>Time</u>

Value 112/68 Location Left Arm

96 Room Air

Position Sitting

Cuff Size

Provider

06/13/2020 10:43 FTD

Time

Value(%) Air

Adult-regular Orapello, Brian RN

SaO2:

Date

06/13/2020

10:43 FTD

Provider

Orapello, Brian RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/13/2020 10:48 Sex: M Race: WHITE Provider: Pugliese, Nicole RN

Reg #: 71610-050

Facility: FTD Unit: R02

Exam:

Cardiovascular
Observation

Yes: Within Normal Limits

Gastrointestinal General

Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/No Apparent Distress

This 72 yo male patient is being evaluated this AM for COVID-19.

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Date Initiated Format 06/13/2020 Counseling Handout/Topic
Plan of Care

Provider
Pugliese, Nicole

Outcome
Verbalizes
Understanding

06/13/2020 Cou

Counseling

Access to Care

Pugliese, Nicole

Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/13/2020 10:50

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.

Review documentation will be displayed on the following page.

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/13/2020 10:48 Sex: Provider: M Pugliese, Nicole RN Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/13/2020 12:13.

Inmate Name: BASRALIAN, GARY
Date of Birth: 07/02/1947
Encounter Date: 06/13/2020 10:48

BASRALIAN, GARY
Sex: M
Reg #: 71610-050
Race: WHITE
Frovider: Pugliese, Nicole RN
Facility: FTD

Reviewed by Turner-Foster, Nicoletta MD/CD on 06/17/2020 12:06.

Inmate Name:

BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/12/2020 12:49 Sex:

Race: WHITE Provider: Pugliese, Nicole RN

71610-050 Reg #: Facility: FTD

R02 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit

Provider Celsius Location

12:49 FTD 06/12/2020

97.6 36.4 Pugliese, Nicole RN

Pulse:

Date

Time

Rate Per Minute

Location

Rhythm

Provider

06/12/2020 12:49 FTD

57

Pugliese, Nicole RN

Respirations:

Date

Time

Rate Per Minute Provider

06/12/2020

12:49 FTD

16 Pugliese, Nicole RN

Blood Pressure:

Date Time

06/12/2020 12:49 FTD

Value 130/77 Location

97 Room Air

Position

Cuff Size

Provider

Pugliese, Nicole RN

SaO2:

Date

06/12/2020

Time

12:49 FTD

Value(%) Air

Provider

Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Provider: Pugliese, Nicole RN

71610-050 Reg #: BASRALIAN, GARY Inmate Name: Race: WHITE Facility: FTD Sex: Date of Birth: 07/02/1947 R02 Encounter Date: 06/12/2020 12:49 Unit:

Exam:

Cardiovascular Observation

Yes: Within Normal Limits

Gastrointestinal General

> Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/No Apparent Distress

This 72 yo male patient is being evaluated this AM for COVID-19.

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Provider Outcome Handout/Topic **Date Initiated Format** Verbalizes Pugliese, Nicole Access to Care 06/12/2020 Counseling Understanding

Plan of Care Pugliese, Nicole Verbalizes 06/12/2020 Counseling Understanding

Cosign Required: Yes Copay Required: No

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/12/2020 12:52

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.

Review documentation will be displayed on the following page.

Inmate Name: BASRALIAN, GARY
Date of Birth: 07/02/1947 Sex: M Race: WHITE
Encounter Date: 06/12/2020 12:49 Provider: Pugliese, Nicole RN Facility: FTD

Cosigned by Chinwalla, F. DO on 06/13/2020 12:24.

Inmate Name:

BASRALIAN, GARY

Date of Birth: Encounter Date: 06/12/2020 12:49

07/02/1947

Sex: Provider: Μ

Pugliese, Nicole RN

Reg #: Race: Facility: 71610-050 WHITE

FTD

Reviewed by Turner-Foster, Nicoletta MD/CD on 06/17/2020 12:09.

Inmate Name:

BASRALIAN, GARY

07/02/1947

Date of Birth: Encounter Date: 06/11/2020 11:31 Sex:

М Race: WHITE

Provider: Hernandez, Jessica RN

71610-050 Reg #:

Facility: FTD R02 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: No Complaint(s)

Subjective: Evaluation of isolated covid-19 positive IM

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit

Celsius Location

Provider

06/11/2020

11:30 FTD

36.6 97.9

Hernandez, Jessica RN

Pulse:

Time Date

Rate Per Minute Location **Rhythm**

Provider

06/11/2020 11:30 FTD

55

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/11/2020

11 30 FTD

18 Hernandez, Jessica RN

Blood Pressure:

Date

Value

Location

Position

Cuff Size

Provider

Time 06/11/2020 11:30 FTD 130/86

Hernandez, Jessica RN

SaO2:

Date

Time

Value(%) Air

Provider

06/11/2020

11:30 FTD

98 Room Air

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

No Significant Findings/No Apparent Distress

IM denies any covid-19 like symptoms at this time and remains asymptomatic. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait around isolated

BASRALIAN, GARY Inmate Name:

Date of Birth: 07/02/1947

Encounter Date: 06/11/2020 11:31

Race: WHITE Sex: М Provider: Hernandez, Jessica RN

71610-050 Reg #:

Facility: FTD R02 Unit:

housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated Format Counseling 06/11/2020

Handout/Topic Access to Care

Provider Hernandez, Jessica **Outcome** Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/11/2020 11:33 Requested to be cosigned by Turner-Foster, Nicoletta MD/CD. Cosign documentation will be displayed on the following page.

Inmate Name: BASF Date of Birth: 07/02

BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/11/2020 11:31 Sex: Provider: М

Hernandez, Jessica RN

Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Turner-Foster, Nicoletta MD/CD on 06/11/2020 15:47.

Inmate Name: Date of Birth:

BASRALIAN, GARY

07/02/1947

Encounter Date: 06/10/2020 12:22

Sex:

Race: WHITE

Provider: Hernandez, Jessica RN

Reg #: Unit:

Facility: FTD R02

71610-050

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: No Complaint(s)

Subjective: Evaluation of isolated covid-19 positive IM

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/10/2020

12:23 FTD

98.2 36.8 Hernandez, Jessica RN

Pulse:

Date <u>Time</u>

Rate Per Minute

Location

Rhythm

Provider

06/10/2020 12:23 FTD

60

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/10/2020

12:23 FTD

18 Hernandez, Jessica RN

Blood Pressure:

Date

Time

Value

Location

Position

Cuff Size

<u>Provider</u>

06/10/2020 12:23 FTD

136/77

Hernandez, Jessica RN

SaO2:

Date

Time

Value(%) Air

Provider

06/10/2020

12:23 FTD

98 Room Air

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

No Significant Findings/No Apparent Distress

IM denies any covid-19 like symptoms at this time and remains asymptomatic. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait around isolated

Inmate Name: BASRALIAN, GARY Reg #: 71610-050

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD Encounter Date: 06/10/2020 12:22 Provider: Hernandez, Jessica RN Unit: R02

housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated Format
06/10/2020 Counseling A

Handout/Topic
Access to Care

Provider
Hernandez, Jessica

Outcome
Verbalizes
Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/10/2020 12:25

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Inmate Name: Date of Birth: BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/10/2020 12:22 Sex: Provider: M Hernandez, Jessica RN Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/10/2020 13:09.

Inmate Name: BASRALIAN, GARY

Date of Birth:

07/02/1947

Encounter Date: 06/09/2020 09:45

Sex:

Race: WHITE Provider: Pugliese, Nicole RN

71610-050 Reg #:

Facility: FTD R02 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is Subjective:

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Pulse:

Date <u>Time</u>

Rate Per Minute

Location

Rhythm

Provider

06/09/2020 09:45 FTD

67

Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Cardiovascular

Observation

Yes: Within Normal Limits

Gastrointestinal

General

Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/No Apparent Distress

This 72 yo male patient is being evaluated this AM for COVID-19.

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947

Encounter Date: 06/09/2020 09:45

Sex: M Race: WHITE Facility: FTD

Unit: R02

denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

PLAN:

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/09/2020 09:47

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947

Encounter Date: 06/09/2020 09:38

Sex: Race: WHITE

Provider: Pugliese, Nicole RN

71610-050 Reg #:

Facility: FTD R₀2 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASPALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

(is ation in unit 5851. currently

Pain:

No

OBJECTIVE:

Temperature:

Date 06/09/2020 **Time**

09:39 FTD

Celsius Location

Provider

Pugliese, Nicole RN

Pulse:

Date

Time

Rate Per Minute

Rhythm

Provider

06/09/2020 09:39 FTD

Pugliese, Nicole RN

Respirations:

Date

Time

Rate Per Minute Pro

06/09/2020

09:39 FTD

17 Pugliese

Blood Pressure:

Date 06/09/2020 09:39 FTD

<u>Time</u>

Value 118/78 Location

Position

Bureau of Prisons - FTD

<u>Provider</u>

Pugliese, Nicole RN

SaO2:

Date

06/09/2020

Time 09:39 FTD

Value(%) Air

98 Room Air

Provider
Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

.LIAN, GARY

. ru2/1947 _ate: 06/09/2020 09:38 Sex:

Race: WHITE Provider: Pugliese, Nicole RN

71610-050 Reg #:

Facility: FTD Unit: R02

_am:

Cardiovascular

Observation

Yes: Within Normal Limits

Gastrointestinal

General

Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

parent Distress No Significant Findings/

emg evaluated this AM for COVID-19. This 72 yo male patient is

Hampbulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, IM is isolated in unit 50 stress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. diarrhea, n/v. He is in no a Inmate denies any injury. In the split injury injury. Injury injury injury. Injury injury injury. Injury injury injury. Injury. Injury. Injury. Injury. Injury injury. I denies trauma. Inmate denies PR. questions, PCPT/MD notified of assessment. Inmate will continue to be monitored staff if symptoms worsen. by HSU staff. Inmate was instructed to notif

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Date Initiated Format 06/09/2020

Counseling

Handout/Topic Access to Care

06/09/2020

Counseling

Plan of Care

Outcome Verbalizes Understanding

Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/09/2020 09:42

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.

Review documentation will be displayed on the following page.

Inmate Name:

BASRALIAN, GARY

Date of Birth:

07/02/1947

Encounter Date: 06/09/2020 09:38

Sex:

Race: WHITE Provider: Pugliese, Nicole RN

Facility: FTD Unit: R₀2

71610-050

Reg#:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Inmate BASSALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

(iscation in unit 5851. currently

Pain:

No

OBJECTIVE:

Temperature:

Date

06/09/2020

Time

09:39 FTD

Celsius Location

Provider

Pugliese, Nicole RN

Pulse:

Date

Time

Rate Per Minute

Rhythm

Provider

06/09/2020 09:39 FTD

Pugliese, Nicole RN

Respirations:

Date

Time

Rate Per Minute

06/09/2020

09:39 FTD

17 Puglies

Blood Pressure:

Date 06/09/2020 09:39 FTD

06/09/2020

Time

Value 118/78 Location

Position

<u>Provider</u>

Pugliese, Nicole RN

SaO2:

Date

Time

09:39 FTD

Value(%) Air

98 Room Air

Provider
Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Case 2:18-cr-00515-MCA Document 34-2 Filed 12/01/20 Page 34 of 49 PageID: 366

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/09/2020 09:38

Race: WHITE Sex: Provider: Pugliese, Nicole RN

71610-050 Reg #:

Facility: FTD R02 Unit:

Exam:

Cardiovascular Observation

Yes: Within Normal Limits

Gastrointestinal General

> Yes: Within Normal Limits No: Diarrhea, Vomiting

ASSESSMENT:

No Significant Findings/parent Distress

This 72 yo male patient is emg evaluated this AM for COVID-19.

bulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, IM is isolated in unit 50 stress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA. diarrhea, n/v. He is in no a Inmate denies any injury. In the denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blur de icon, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PR questions_PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff. Inmate was instructed to notife the staff if symptoms worsen. vic PL

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

06/09/2020

Copay Required: No

Date Initiated Format 06/09/2020 Counseling

> Plan of Care Counseling

> > Cosign Required: Yes

Handout/Topic

Access to Care

Telephone/Verbal Order: No

Completed by Pugliese, Nicole RN on 06/09/2020 09:42

Requested to be cosigned by Chinwalla, F. DO.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.

Review documentation will be displayed on the following page.

Outcome Verbalizes Understanding Verbalizes

Understanding

Bureau of Prisons Health Services See Amendment

Inmate Name: Date of Birth:

BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/09/2020 09:45 Sex:

М

Reg #:

71610-050

Race: Facility: WHITE FTD

Amendment made to this note by Pugliese, Nicole RN on 06/09/2020 09:47.

Inmate Name:

BASRALIAN, GARY

Date of Birth: Encounter Date: 06/09/2020 09:38

07/02/1947

Sex: Provider: М

Pugliese, Nicole RN

Reg #: Race:

71610-050 WHITE

Facility: FTD

Cosigned by Chinwalla, F. DO on 06/09/2020 17:28.

BASRALIAN, GARY Inmate Name:

Date of Birth: 07/02/1947

Encounter Date: 06/08/2020 11:48

Race: WHITE Sex: Provider: Orapello, Brian RN

71610-050 Reg #: Facility: FTD

Unit: R₀₂

Nursing - Evaluation encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1

Provider: Orapello, Brian RN

Chief Complaint: INFECTIOUS DISEASE

72 yo male patient is being evaluated this AM for COVID-19. He is currently in isolation in unit

5851. Today he has no complaints.

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

11:48 FTD

98.0

Fahrenheit Celsius Location

Provider

Orapello, Brian RN

Pulse:

Date

06/08/2020

Time

Rate Per Minute

Location

36.7 Forehead

Rhythm

Provider

06/08/2020 11:48 FTD

68 Via Machine Regular

Orapello, Brian RN

Respirations:

Date

Time

Rate Per Minute Provider

06/08/2020

11:48 FTD

16 Orapello, Brian RN

Blood Pressure:

Date Time

Value

Location

97 Room Air

Position

Cuff Size

Provider

Adult-regular Orapello, Brian RN 06/08/2020 11:48 FTD 113/75 Left Arm Sitting

SaO2:

Date

06/08/2020

Time 11:48 FTD Value(%) Air

Provider

Orapello, Brian RN

Exam:

General

Affect

Yes: Cooperative

Appearance

Yes: Alert and Oriented x 3

Pulmonary

Observation/Inspection

Yes: Within Normal Limits

Cardiovascular

Observation

Yes: Within Normal Limits

Gastrointestinal

General

Yes: Within Normal Limits

Inmate Name: BASRALIAN, GARY Reg #: 71610-050

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD
Encounter Date: 06/08/2020 11:48 Provider: Orapello, Brian RN Unit: R02

Exam:

Genitourinary General

Yes: Within Normal Limits

ASSESSMENT:

Other

72 yo male patient is being evaluated this AM for COVID-19.

IM denies any covid-19 like symptoms and is asymptomatic at this time. He has no complaints today.

IM is isolated in unit 5851. IM aaox3 appears in no acute distress, facial symmetry noted, grasps equal, mucosa pink and moist, respirations even and unlabored, denies SOB, denies diarrhea, voiding with no difficulty, skin w/p/d. Ambulatory with a steady gait around isolated housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated. PCPT/MD notified of assessment. Inmate will continue to be monitored by HSU staff.

Inmate was instructed to notify HSU staff if he develops symptoms.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated
06/08/2020Format
CounselingHandout/Topic
Access to CareProvider
Orapello, BrianOutcome
Verbalizes
Understanding

06/08/2020 Counseling Plan of Care Orapello, Brian

Verbalizes Understanding

Copay Required: No Cosign Required: Yes Telephone/Verbal Order: Yes By: Chinwalla, F. DO

Telephone or Verbal order read back and verified.

Completed by Orapello, Brian RN on 06/08/2020 11:50
Requested to be cosigned by Chinwalla, F. DO.
Cosign documentation will be displayed on the following page.
Requested to be reviewed by Turner-Foster, Nicoletta MD/CD.
Review documentation will be displayed on the following page.

Bureau of Prisons Health Services Cosign/Review

Inmate Name:

BASRALIAN, GARY

Date of Birth: 07/02/1947 Encounter Date: 06/08/2020 11:48 Sex: Provider: M Orapello, Brian RN Reg #: Race: Facility: 71610-050 WHITE FTD

Cosigned by Chinwalla, F. DO on 06/22/2020 17:28.

Inmate Name:

BASRALIAN, GARY

07/02/1947

Encounter Date: 06/07/2020 10:33

Sex:

Race: WHITE

Provider: Hernandez, Jessica RN

71610-050 Reg #:

Facility: FTD R02 Unit:

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

Date of Birth:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: No Complaint(s)

Evaluation of isolated covid-19 positive IM

Pain:

No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/07/2020

10:33 FTD

36.4 97.6

Hernandez, Jessica RN

Pulse:

Time Date

Rate Per Minute

Location

Rhythm

Provider

06/07/2020 10:33 FTD

63

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/07/2020

10:33 FTD

18 Hernandez, Jessica RN

Blood Pressure:

Date

Time

Value

Location

Position

Cuff Size

Provider

06/07/2020 10:33 FTD

147/77

Hernandez, Jessica RN

SaO2:

Date

Time

Value(%) Air

06/07/2020

10:33 FTD

98 Room Air

Provider

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

No Significant Findings/No Apparent Distress

IM denies any covid-19 like symptoms at this time and denies mouth ulcers today. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait

Reg #: Inmate Name: BASRALIAN, GARY

71610-050 Facility: FTD 07/02/1947 Sex: Race: WHITE Date of Birth: Encounter Date: 06/07/2020 10:33 Provider: Hernandez, Jessica RN Unit: R₀2

around isolated housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

Follow-up at Sick Call as Needed Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated Format 06/07/2020 Counseling Handout/Topic Access to Care

Provider Hernandez, Jessica

Outcome Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/07/2020 10:36 Requested to be cosigned by Turner-Foster, Nicoletta MD/CD. Cosign documentation will be displayed on the following page.

Bureau of Prisons Health Services Cosign/Review

Inmate Name: BASRALIAN, GARY
Date of Birth: 07/02/1947
Encounter Date: 06/07/2020 10:33

Reg #: 71610-050
Race: WHITE
Provider: Hernandez, Jessica RN Facility: FTD

Cosigned by Turner-Foster, Nicoletta MD/CD on 06/09/2020 17:06.

Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: Date of Birth:

BASRALIAN, GARY

Note Date:

07/02/1947 06/06/2020 15:20 Sex: Provider: M Race: WHITE Turner-Foster, Nicoletta

Reg #: Facility:

Unit:

71610-050

FTD R02

Cosign Note - Clinical Encounter Cosign encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1

Provider: Turner-Foster, Nicoletta MD/CD

06/02/2020 SARS-CoV-2 is NEGATIVE

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Turner-Foster, Nicoletta MD/CD on 06/06/2020 15:20

Inmate Name: BASRALIAN, GARY

07/02/1947 Date of Birth: Encounter Date: 06/06/2020 12:17

Sex: Race: WHITE Provider: Hernandez, Jessica RN Reg #: 71610-050 Facility: FTD Unit: R₀₂

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Hernandez, Jessica RN

Chief Complaint: Other Problem

Evaluation of isolated covid-19 positive IM

Pain: No

OBJECTIVE:

Temperature:

Date

Time

Fahrenheit Celsius Location

Provider

06/06/2020

12:17 FTD

36.7

Hernandez, Jessica RN

Pulse:

Date <u>Time</u>

Rate Per Minute

Location

Rhythm

Provider

06/06/2020 12:17 FTD

68

98.1

Hernandez, Jessica RN

Respirations:

Date

Time

Rate Per Minute Provider

06/06/2020

12:17 FTD

18 Hernandez, Jessica RN

Provider

Blood Pressure:

Date

Time

Value

Location

97 Room Air

Position

Cuff Size

Provider

06/06/2020 12:17 FTD

146/85

Hernandez, Jessica RN

SaO2:

Date 06/06/2020 Time

12:17 FTD

Value(%) Air

Hernandez, Jessica RN

Exam:

General

Appearance

Yes: Appears Well, Alert and Oriented x 3

Skin

Yes: Within Normal Limits, Dry, Skin Intact

Pulmonary

Observation/Inspection

Yes: Within Normal Limits No: Respiratory Distress

ASSESSMENT:

Ulcers-Intraoral and/or Lip

IM c/o mouth sores that he admits started 4 days ago; however, he states they are improving. IM aaox4 appears in no acute distress, denies headache, denies dizziness, mucosa pink and moist, respirations even and unlabored, denies chest pain, denies cough, denies SOB, denies diarrhea, voiding with no difficulty, skin w/d. Ambulatory with a steady gait

Inmate Name: BASRALIAN, GARY Reg #: 71610-050

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD Encounter Date: 06/06/2020 12:17 Provider: Hernandez, Jessica RN Unit: R02

around isolated housing unit. IM encouraged to stay well hydrated via oral intake and continue activity as tolerated.

PLAN:

Disposition:

To be Evaluated by Provider

Patient Education Topics:

Date InitiatedFormatHandout/Topic06/06/2020CounselingAccess to Care

<u>Provider</u> Hernandez, Jessica Outcome Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Hernandez, Jessica RN on 06/06/2020 12:21 Requested to be cosigned by Turner-Foster, Nicoletta MD/CD. Cosign documentation will be displayed on the following page.

Inmate Name:

BASRALIAN, GARY

Date of Birth:

07/02/1947

Encounter Date: 06/19/2020 09:10

Sex:

M Race: WHITE

Reg #: Facility 71610-050

Facility: FTD Unit: R02

Physician - Evaluation encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1

Provider: Chinwalla, F. DO

Chief Complaint: GENERAL

Subjective: Patient is beir

Patient is being evaluated this AM for COVID-19. He is currently in isolation in unit 5851.

Provider: Chinwalla, F. DO

Today he has no complaints.

Pts BP is mildly elevated. Pt admits to stress due to a death in his family.

Pain:

No

ROS:

General

Constitutional Symptoms

No: Anorexia, Chills, Fatigue, Fever

Cardiovascular

General

Yes: Within Normal Limits No: Angina, Cough, Edema

Pulmonary

Respiratory System

Yes: Within Normal Limits

No: Cough - Dry, DOE, Dyspnea

GI

General

Yes: Within Normal Limits

No: Abdominal Pain or Colic, Blood in Stools, Constipation, Diarrhea

Neurological

Autonomic System

No: Syncope

OBJECTIVE:

Temperature:

<u>Date</u>

Time

<u>Fahrenheit</u>

renheit Celsius Location

Provider

06/19/2020

09:12 FTD

97.2

Chinwalla, F. DO

Pulse:

<u>Date</u>

<u>Time</u>

Rate Per Minute

Location

Rhythm

Provider

06/19/2020 09:12 FTD

61

Chinwalla, F. DO

Respirations:

<u>Date</u>

<u>Time</u>

Rate Per Minute Provider

36.2

06/19/2020

09:12 FTD

14 Chinwalla, F. DO

Blood Pressure:

<u>Date</u>

<u>Time</u>

Value

Location

Position

Cuff Size

Provider

Inmate Name: BASRALIAN, GARY Reg #:

71610-050 Facility: Date of Birth: 07/02/1947 Sex: Race: WHITE FTD Encounter Date: 06/19/2020 09:10 Provider: Chinwalla, F. DO Unit: R02

Date Time Value Location **Position Cuff Size Provider** 06/19/2020 09:12 FTD 145/77 Chinwalla, F. DO

SaO2:

Date Time Value(%) Air Provider

06/19/2020 09:12 FTD 97 Room Air Chinwalla, F. DO

Exam:

General

Appearance

Yes: Appears Well

Skin

General

Yes: Within Normal Limits

Head

General

Yes: Symmetry of Motor Function, Atraumatic/Normocephalic

Pulmonary

Observation/Inspection

No: Coughing, severe w production green/brown mucus, Respiratory Distress

Cardiovascular Observation

Yes: Normal Rate, Regular Rhythm

Abdomen

Inspection

Yes: Within Normal Limits

Neurologic

Motor System-General Yes: Normal Exam

ASSESSMENT:

Confirmed case COVID-19, U07.1 - Current

PLAN:

Disposition:

Follow-up Daily

Other:

IM is isolated in unit 5851. He ambulates with a steady gait. AAOx3. VS Stable. Skin pwd, He denies SOB, cough, diarrhea, n/v. He is in no acute distress. Respirations are clear and unlabored. He has no neurological deficit. PERRLA.

Inmate denies any injury. Inmate specifically denies loss of consciousness, nausea, vomiting, unilateral weakness, abdominal pain, headache, blurred vision, throat pain, and malaise. Inmate denies head, neck and back pain. Inmate denies trauma. Inmate denies PREA questions. PCPT/MD notified of assessment. Inmate will continue to be

by HSU staff. Inmate was instructed to notify HSU staff if symptoms worsen.

Patient Education Topics:

Inmate Name: BASRALIAN, GARY

Date of Birth: 07/02/1947

Sex: M Race: WHITE Facility: FTD

Date of Birth: 07/02/1947 Sex: M Race: WHITE Facility: FTD Encounter Date: 06/19/2020 09:10 Provider: Chinwalla, F. DO Unit: R02

Date InitiatedFormatHandout/TopicProviderOutcome06/19/2020CounselingAccess to CareChinwalla, F.Verbalizes
Understanding

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Chinwalla, F. DO on 06/19/2020 09:19

Inmate Name:

BASRALIAN, GARY

Date of Birth:

07/02/1947

Encounter Date: 06/18/2020 12:49

Sex:

Race: WHITE

Provider: Pugliese, Nicole RN

Reg #: Facility: 71610-050

Unit:

FTD R₀₂

Nursing - Evaluation encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1

Provider: Pugliese, Nicole RN

Chief Complaint: INFECTIOUS DISEASE

Subjective: Inmate BASRALIAN is a 72 yo male patient is being evaluated this AM for COVID-19. He is

currently in isolation in unit 5851.

Pain:

No

OBJECTIVE:

Temperature:

Date

<u>Time</u>

Fahrenheit Celsius Location

Provider

06/18/2020

12:50 FTD

97.4 36.3

Pugliese, Nicole RN

Pulse:

Date

Time

Rate Per Minute

Location

Rhythm

Provider

06/18/2020 12:50 FTD

53

Pugliese, Nicole RN

Respirations:

Date

Time

Rate Per Minute Provider

06/18/2020

12:50 FTD

17 Pugliese, Nicole RN

Blood Pressure:

Date

Value

Location

Position

Cuff Size

<u>Provider</u>

Time 06/18/2020 12:50 FTD 159/92

Pugliese, Nicole RN

SaO2:

Date

06/18/2020

Time

12:50 FTD

Value(%) Air 100 Room Air Provider

Pugliese, Nicole RN

Exam:

General

Affect

Yes: Pleasant, Cooperative

Appearance

Yes: Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

Mouth

Mucosa

Yes: Within Normal Limits

Pulmonary

Observation/Inspection

Yes: Within Normal Limits